

## United States Bankruptcy Court for the:

## Northern District of Georgia

Case number (*If known*): \_\_\_\_\_ Chapter \_\_\_\_\_

Check if this is an amended filing

# Official Form 201

## **Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/24

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Communications and Entertainment, Inc.		
2. All other names debtor used in the last 8 years	Communications and Entertainment Communications & Entertainment Inc.		
Include any assumed names, trade names, and <i>doing business as</i> names			
3. Debtor's federal Employer Identification Number (EIN)	58-1969768		
4. Debtor's address	Principal place of business		Mailing address, if different from principal place of business
	250 Hembree Park Drive		
	Number	Street	Number
	Suite 114		Street
	Roswell	GA	P.O. Box
	City	State	City
		ZIP Code	State
			ZIP Code
	Location of principal assets, if different from principal place of business		
	Number	Street	
	City	State	ZIP Code
5. Debtor's website (URL)	<a href="https://www.ceiav.com/">https://www.ceiav.com/</a>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership ( LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor	Communications and Entertainment, Inc. Name _____		Case number ( <i>if known</i> ) _____
<b>7. Describe debtor's business</b>			
<p>A. <i>Check one:</i></p> <p><input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A))  <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44))  <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A))  <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6))  <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3))  <input checked="" type="checkbox"/> None of the above</p> <hr/> <p>B. <i>Check all that apply:</i></p> <p><input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501)  <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))</p> <hr/> <p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  See <a href="http://www.naics.com/search/">http://www.naics.com/search/</a>.</p> <p style="text-align: center;"><u>5415</u></p>			
<p><b>8. Under which chapter of the Bankruptcy Code is the debtor filing?</b></p> <p><i>Check one:</i></p> <p><input checked="" type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input type="checkbox"/> Chapter 11. <i>Check all that apply:</i></p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).</p> <p><input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).</p> <p><input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).</p> <p><input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form.</p> <p><input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.</p> <p><input type="checkbox"/> Chapter 12</p>			
<p><b>9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. District _____ When _____ Case number _____  MM / DD / YYYY</p> <p>If more than 2 cases, attach a separate list.</p> <p>District _____ When _____ Case number _____  MM / DD / YYYY</p>			
<p><b>10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Debtor _____ Relationship _____  District _____ When _____  MM / DD / YYYY</p> <p>List all cases. If more than 1, attach a separate list.</p> <p>Case number, if known _____</p>			

Debtor Communications and Entertainment, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

**11. Why is the case filed in this district?** *Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**

No

Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

### Statistical and administrative information

**13. Debtor's estimation of available funds** *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

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**14. Estimated number of creditors**

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

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**15. Estimated assets**

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor	Communications and Entertainment, Inc. Name	Case number (if known)	
<b>16. Estimated liabilities</b>	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$500,001-\$1 million	<input checked="" type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> More than \$50 billion

### Request for Relief, Declaration, and Signatures

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of authorized representative of debtor** The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/22/2025  
MM / DD / YYYY

/s/ Rodney Holder  
Signature of authorized representative of debtor  
Title Owner

Rodney Holder  
Printed name

**18. Signature of attorney**

/s/ Soo Hong  
Signature of attorney for debtor

Date 02/22/2025  
MM / DD / YYYY

Soo Hong  
Printed name  
Blevins & Hong, PC  
Firm name  
191 Roswell Street  
Number Street  
Marietta  
City  
6783542290  
Contact phone

GA State 30060 ZIP Code  
shong@cobbcountylaw.com Email address

129608  
Bar number GA State

**Fill in this information to identify the case:**

Debtor name	Communications and Entertainment, Inc.
United States Bankruptcy Court for the: Northern District of Georgia	
Case number (If known):	_____

Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>01/01/2025</u> <u>MM / DD / YYYY</u>	to	Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>62,513.33</u>
<b>For prior year:</b>	From <u>01/01/2024</u> <u>MM / DD / YYYY</u>	to	<u>12/31/2024</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>1,562,522.00</u>
<b>For the year before that:</b>	From <u>01/01/2023</u> <u>MM / DD / YYYY</u>	to	<u>12/31/2023</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ <u>1,429,844.00</u>

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>  </u> <u>MM / DD / YYYY</u>	to	Filing date <u>  </u>	\$ <u>  </u>
<b>For prior year:</b>	From <u>  </u> <u>MM / DD / YYYY</u>	to	<u>  </u> <u>MM / DD / YYYY</u>	\$ <u>  </u>
<b>For the year before that:</b>	From <u>  </u> <u>MM / DD / YYYY</u>	to	<u>  </u> <u>MM / DD / YYYY</u>	\$ <u>  </u>

Debtor \_\_\_\_\_  
 Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

## Part 2: List Certain Transfers Made Before Filing for Bankruptcy

### 3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/23 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. _____ Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. _____ Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

### 4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. _____ Insider's name _____ _____ _____	_____	\$ _____	
<b>Relationship to debtor</b> _____			
4.2. _____ Insider's name _____ _____ _____	_____	\$ _____	
<b>Relationship to debtor</b> _____			

Debtor  
Name  
Communications and Entertainment, Inc.

Case number (if known)

##### 5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name			\$ _____

5.2.

Creditor's name \_\_\_\_\_ \$ \_\_\_\_\_

##### 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name			\$ _____

Last 4 digits of account number: XXXX- \_\_\_\_\_

#### Part 3: Legal Actions or Assignments

##### 7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Highland Hill Capital LLC v. Communications and Entertainment, Inc. dba Communications and Entertainment dba CEO AV dba CEI	Breach of Contract	Monroe County Supreme Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number E2025003314		99 Exchange Blvd # 545 Rochester, NY 14614	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

7.2. Case title  
Amerifi Capital, LLC v. Communications and Entertainment, Inc. and Rodney Don Holder

Case number  
Breach of Contract

Court or agency's name and address  
Connecticut Superior Court - Stamford/Norwalk Judicial District

Pending  
 On appeal  
 Concluded

123 Hoyt Street  
Stamford, CT 06905

Debtor  
Communications and Entertainment, Inc.  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

#### 8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
Custodian's name _____	_____	\$ _____
Case title _____	_____	Court name and address _____
Case number _____	Name _____	
Date of order or assignment _____	_____	

#### Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name _____	_____	_____	\$ _____
	_____	_____	\$ _____
Recipient's relationship to debtor			_____
9.2. Recipient's name _____	_____		\$ _____
Recipient's relationship to debtor			_____

#### Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
Cyberhack and lost money from client	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	08/10/2024	\$ 50,000.00

Debtor \_\_\_\_\_  
 Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Blevins & Hong, P.C. _____ Address 191 Roswell Street Marietta, GA 30060	Chapter 7 Business Bankruptcy Attorney's Fees & Filing Fees	02/13/2025	\$ 6,000.00

## Email or website address

bk@cobbcountylaw.com

## Who made the payment, if not debtor?

\_\_\_\_\_  
\_\_\_\_\_

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	_____	_____	_____	\$ _____

## Email or website address

\_\_\_\_\_  
\_\_\_\_\_

## Who made the payment, if not debtor?

\_\_\_\_\_  
\_\_\_\_\_**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____ _____ Trustee _____ _____	_____	_____	\$ _____

Debtor \_\_\_\_\_  
 Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. Patrick Cole	2012 Jaguar XJ, VIN: SAJWA1GE4CMV29982	02/06/2025	\$ 2,500.00

Address \_\_\_\_\_

**Relationship to debtor**

Buyer \_\_\_\_\_

Who received transfer?		Date transfer was made	Total amount or value
13.2. Donnie Holder	2001 Ford F-250 Pickup Truck, VIN: 2GTEK19T011162977	02/06/2025	\$ 2,000.00

**Relationship to debtor**

Buyer \_\_\_\_\_

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1.	From _____ To _____
14.2.	From _____ To _____

Debtor \_\_\_\_\_  
 Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

### Part 8: Health Care Bankruptcies

#### 15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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15.1. \_\_\_\_\_ Facility name \_\_\_\_\_

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.

**How are records kept?**

*Check all that apply:*

- Electronically
- Paper

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

15.2. \_\_\_\_\_ Facility name \_\_\_\_\_

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.

**How are records kept?**

*Check all that apply:*

- Electronically
- Paper

### Part 9: Personally Identifiable Information

#### 16. Does the debtor collect and retain personally identifiable information of customers?

No.

Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

- No
- Yes

#### 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan \_\_\_\_\_

Employer identification number of the plan \_\_\_\_\_

EIN: \_\_\_\_\_

Has the plan been terminated?

- No
- Yes

Debtor \_\_\_\_\_  
 Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. _____ Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other_____	_____	\$ _____
18.2. _____ Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other_____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Address \_\_\_\_\_

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Address \_\_\_\_\_

Debtor \_\_\_\_\_ Communications and Entertainment, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

### Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

#### 21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____			\$ _____

### Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

#### 22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

#### 23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____		_____

Debtor Communications and Entertainment, Inc. Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- No  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____		

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____
		Dates business existed From _____ To _____

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____
		Dates business existed From _____ To _____

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____
		Dates business existed From _____ To _____

Debtor Communications and Entertainment, Inc. Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**26. Books, records, and financial statements**

- 26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Dates of service
Maurice Hamilton - Attaway Linville Name 1117 Perimeter Center West, Suite W212, Atlanta, GA 30338	From <u>01/01/2019</u> To <u>02/22/2025</u>

26a.2. \_\_\_\_\_

Dates of service

From \_\_\_\_\_  
To \_\_\_\_\_

- 26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address	Dates of service
26b.1. _____ Name	From _____ To _____

26b.2. \_\_\_\_\_

Dates of service

From \_\_\_\_\_  
To \_\_\_\_\_

- 26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address	If any books of account and records are unavailable, explain why
26c.1. _____ Name	

Debtor \_\_\_\_\_  
Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Name and address**

If any books of account and records are  
unavailable, explain why

26c.2.

Name \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address**

26d.1.

Name \_\_\_\_\_

**Name and address**

26d.2.

Name \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the inventory**

**Date of  
inventory**

**The dollar amount and basis (cost, market, or  
other basis) of each inventory**

\_\_\_\_\_

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name \_\_\_\_\_

Debtor Communications and Entertainment, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name \_\_\_\_\_

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Val Dempsey	2628 Camille Drive, Atlanta, GA 30329		11
David Lee	1408 Defoors Drive NW, Atlanta, GA 30318		11
C&C Holder Solutions Inc.	,	Holding Company	80

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			_____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Name _____	_____	_____	_____
Relationship to debtor			_____

Debtor Communications and Entertainment, Inc. Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**Name and address of recipient**

30.2

Name \_\_\_\_\_

**Relationship to debtor**

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No  
 Yes. Identify below.

**Name of the parent corporation**

**Employer Identification number of the parent corporation**

EIN: \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No  
 Yes. Identify below.

**Name of the pension fund**

**Employer Identification number of the pension fund**

EIN: \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/22/2025  
MM / DD / YYYY

 /s/ Rodney Holder

Printed name Rodney Holder

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Owner

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No  
 Yes

Debtor Name \_\_\_\_\_

Communications and Entertainment, Inc.

Case number (if known) \_\_\_\_\_

**Continuation Sheet for Official Form 207**

**7) Legal Actions**

**DMKA LLC dba The Smarter Merchant v. Communications and Entertainment, Inc.  
dba Communications and Entertainment dba Communications &Entertainment, Inc.,  
C&C Holder Solutions Inc., Rodney Don Holder**

**E2025003574**

**Breach of Contract**

**Monroe County Supreme Court**

**99 Exchange Blvd # 545, Rochester, NY 14614**

**Pending**

-----

**13) Transfers not already listed on this statement**

**Transferee: Donnie Holder**

**Date of Transfer: 02/06/2025**

**Description: 2018 Eagle Cargo Trailer, VIN: 7FWB142XJ1002150**

**Value: \$2,000.00**

---

**Transferee: David Turner**

**Date of Transfer: 02/06/2025**

**Description: 2015 Ford Transit Connect Van, VIN: MN0F70F1220937**

**Value: \$0.00**

---

**Transferee: Donnie Holder**

**Date of Transfer: 02/06/2025**

**Description: 2013 Chevrolet Silverado Ext Cab LT, VIN: 1GCRSE04DZ149502**

**Value: \$2,000.00**

---

**Transferee: Donnie Holder**

**Date of Transfer: 02/06/2025**

Debtor Name \_\_\_\_\_

Communications and Entertainment, Inc.

Case number (*if known*) \_\_\_\_\_

**Continuation Sheet for Official Form 207**

**Description:** 2013 GMC Sierra LT, VIN: 2GTEK19T011162977

**Value:** \$2,000.00

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**Transferee:** Donnie Holder

**Date of Transfer:** 02/06/2025

**Description:** 1993 Express Trailer, VIN: 1E9ES1828PC103444

**Value:** \$2,000.00

---

**Fill in this information to identify the case:**Debtor name Communications and Entertainment, Inc.United States Bankruptcy Court for the: Northern District of Georgia

Case number (if known): \_\_\_\_\_

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- No. Go to Part 2.  
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest		
2. Cash on hand	\$ 0.00		
3. Checking, savings, money market, or financial brokerage accounts ( <i>Identify all</i> )			
Name of institution (bank or brokerage firm) 3.1. <u>Truist Bank</u>	Type of account Checking	Last 4 digits of account number 6    4    4    5	\$ 6,697.13
3.2. _____	_____	_____	\$ _____
4. Other cash equivalents ( <i>Identify all</i> )			
4.1. _____	\$ _____		
4.2. _____	\$ _____		
5. Total of Part 1	\$ 6,697.13		
Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.			

**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- No. Go to Part 3.  
 Yes. Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

Description, including name of holder of deposit	Current value of debtor's interest
7.1. _____	\$ _____
7.2. _____	\$ _____

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. _____	\$ _____
8.2. _____	\$ _____

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ \_\_\_\_\_

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less:	<u>30,702.12</u>	- <u>0.00</u>	= ..... →	\$ <u>30,702.12</u>
	face amount	doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>0.00</u>	- <u>0.00</u>	= ..... →	\$ <u>0.00</u>
	face amount	doubtful or uncollectible accounts		

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 30,702.12**Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. _____	_____ %	_____	\$ _____
15.2. _____	_____ %	_____	\$ _____

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	--	---	------------------------------------

**19. Raw materials**

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
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**20. Work in progress**

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

**21. Finished goods, including goods held for resale**

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

**22. Other inventory or supplies**

Equipment _____	02/19/2025	1,000.00
	MM / DD / YYYY	\$ _____

**23. Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

\$ 1,000.00
-------------

**24. Is any of the property listed in Part 5 perishable?** No Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?** No Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

**28. Crops—either planted or harvested**

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**29. Farm animals** Examples: Livestock, poultry, farm-raised fish

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**30. Farm machinery and equipment** (Other than titled motor vehicles)

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**31. Farm and fishing supplies, chemicals, and feed**

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**32. Other farming and fishing-related property not already listed in Part 6**

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

**33. Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

**34. Is the debtor a member of an agricultural cooperative?** No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>39. Office furniture</b> 25 desks (\$75/per), 48 chairs (\$40/per), 13 tables (\$50/per), 7 bookshelves (\$10/per), 1 whiteboard (\$5), 3 glass boards (100/per), 10 file cabinets (\$50/per), 2 couches (\$50/per), 3 refrigerator (\$100/per), 1 microwave (\$50),	\$ _____	_____	\$ 10,345.00
<b>40. Office fixtures</b>	\$ _____	_____	\$ _____
<b>41. Office equipment, including all computer equipment and communication systems equipment and software</b> 12 computers (\$50/per), 1 printer (\$50), 19 monitors (\$10/per)	\$ _____	_____	\$ 840.00
<b>42. Collectibles</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____
<b>43. Total of Part 7.</b>			\$ 11,185.00

Add lines 39 through 42. Copy the total to line 86.

**44. Is a depreciation schedule available for any of the property listed in Part 7?** No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

**47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 2020 Ford Transit Van, VIN: NM0LS7E27L1466434	\$ _____	_____	\$ 15,000.00
47.2 2016 Land Rover Range Rover, VIN: SALGR2KF5GA305332	\$ _____	_____	\$ 18,000.00
47.3 2023 Ford Mavrk, VIN: 3FTTW8E32PRA44850	\$ _____	_____	\$ 30,000.00
47.4 2020 Ford Transit Connect, VIN: NM0LS7E21L1435180	\$ _____	_____	\$ 15,000.00

**48. Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

**49. Aircraft and accessories**

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment  
(excluding farm machinery and equipment)**  
2023 Mid American Trailer, VIN: 4PGBP2422PL094139

\$ \_\_\_\_\_

\$ 6,000.00

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$ 84,000.00

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- No  
 Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- No  
 Yes

**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1		\$ _____	_____	\$ _____
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ \_\_\_\_\_

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- No  
 Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- No  
 Yes

**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ \_\_\_\_\_

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No  
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No  
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No  
 Yes

#### Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.  
 Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ - Total face amount      →      doubtful or uncollectible amount      \$ \_\_\_\_\_

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

\_\_\_\_\_ Tax year \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\_\_\_\_\_ \$ \_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Nature of claim \_\_\_\_\_ \$ \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\_\_\_\_\_ \$ \_\_\_\_\_

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ \_\_\_\_\_

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No  
 Yes

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 6,697.13	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 30,702.12	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 1,000.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 11,185.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 84,000.00	
88. Real property. Copy line 56, Part 9. . . . . →	\$ 0.00	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 133,584.25	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	133,584.25	\$ 133,584.25

## Fill in this information to identify the case:

Debtor name	Communications and Entertainment, Inc.
United States Bankruptcy Court for the:	Northern District of Georgia
Case number (If known):	

Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

**2.1 Creditor's name**

Ally Servicing LLC

## Describe debtor's property that is subject to a lien

2016 Land Rover Range Rover, VIN:  
SALGR2KF5GA305332

*Column A*  
**Amount of claim**  
Do not deduct the value  
of collateral.

*Column B*  
**Value of collateral  
that supports this  
claim**

\$ 40,000.00      \$ 18,000.00

## Creditor's mailing address

PO Box 380902

Bloomington, MN 55438-0902

## Creditor's email address, if known

Date debt was incurred

Last 4 digits of account  
number

2281

Do multiple creditors have an interest in the  
same property? No Yes. Specify each creditor, including this creditor,

## Describe the lien

Agreement you made

## Is the creditor an insider or related party?

- No  
 Yes

## Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**2.2 Creditor's name**

Ally Servicing LLC

## Describe debtor's property that is subject to a lien

2020 Ford Transit Connect, VIN:  
NM0LS7E21L1435180

\$ 28,000.00      \$ 15,000.00

## Creditor's mailing address

PO Box 380902

Bloomington, MN 55438-0902

## Creditor's email address, if known

Date debt was incurred

Last 4 digits of account  
number

5791

Do multiple creditors have an interest in the  
same property? No Yes. Have you already specified the relative  
priority? No. Specify each creditor, including this  
creditor, and its relative priority.

## Describe the lien

Agreement you made

## Is the creditor an insider or related party?

- No  
 Yes

## Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional  
Page, if any.

\$ 127,500.00

**Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

**2.3 Creditor's name**  
Ford Credit

Describe debtor's property that is subject to a lien

2023 Ford Maverick, VIN:  
3FTTW8E32PRA44850

\$36,000.00      \$30,000.00

Creditor's mailing address

PO Box 650575  
Dallas, TX 75265-0575

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number  
5355

Do multiple creditors have an interest in the same property?

- No  
 Yes. Have you already specified the relative priority?  
 No. Specify each creditor, including this creditor, and its relative priority.

Describe the lien

Agreement you made

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**2.4 Creditor's name**  
Ford Credit

Describe debtor's property that is subject to a lien

2020 Ford Transit Van, VIN:  
NM0LS7E27L1466434

\$23,500.00      \$15,000.00

Creditor's mailing address

PO Box 650575  
Dallas, TX 75265-0575

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number  
2553

Do multiple creditors have an interest in the same property?

- No  
 Yes. Have you already specified the relative priority?  
 No. Specify each creditor, including this creditor, and its relative priority.

Describe the lien

Agreement you made

Is the creditor an insider or related party?

- No  
 Yes

Is anyone else liable on this claim?

- No  
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Debtor**

## Communications and Entertainment, Inc.

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**Case number (if known)**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Fill in this information to identify the case:

Debtor Communications and Entertainment, Inc.

United States Bankruptcy Court for the: Northern District of Georgia

Case number  
(If known) Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

## Part 1: List All Creditors with PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.  
 Yes. Go to line 2.

## 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
<b>2.1 Priority creditor's name and mailing address</b> Fulton County Tax Commissioner 141 Pryor Street, SW Atlanta, GA 30303	As of the petition filing date, the claim is: \$ 9,914.30 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
<b>Date or dates debt was incurred</b>  Last 4 digits of account number P20220000532	<b>Basis for the claim:</b> Taxes & Other Government Units	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( <u>8</u> )	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>2.2 Priority creditor's name and mailing address</b> Georgia Department of Revenue Compliance Division - ARCS - Bankruptcy 1800 Century Blvd NE, Suite 9100 Atlanta, GA 30345-3205	As of the petition filing date, the claim is: \$ 14,800.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
<b>Date or dates debt was incurred</b>  Last 4 digits of account number _____	<b>Basis for the claim:</b> Taxes & Other Government Units	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( <u>8</u> )	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>2.3 Priority creditor's name and mailing address</b> Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101	As of the petition filing date, the claim is: \$ 58,400.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
<b>Date or dates debt was incurred</b>  Last 4 digits of account number _____	<b>Basis for the claim:</b> Taxes & Other Government Units	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( <u>8</u> )	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
			\$ _____
3.1	ABC/Amega 500 Seneca Street Suite 503 Buffalo, NY 14204	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
		Basis for the claim: Collection Agency for Ingram Micro, Inc.	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Accu-Tech 11350 Old Roswell Road Suite 100 Roswell, GA 30009	As of the petition filing date, the claim is: Check all that apply.	\$ 6,136.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Adams, Evans & Ross 3760 Sixes Rd Suite 126 Canton, GA 30114	As of the petition filing date, the claim is: Check all that apply.	\$ 0.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	Collection Agency for TOA Electronics, Inc.
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	ADI 260 Old Country Road Melville, NY 11747	As of the petition filing date, the claim is: Check all that apply.	\$ 14,500.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	Deficiency Balance
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Advantage Products Enterprise (APE) 1235 Park Lane S Jupiter, FL 33458	As of the petition filing date, the claim is: Check all that apply.	\$ 5,400.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	Deficiency Balance
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	American Express PO Box 981535 El Paso, TX 79998-1535	As of the petition filing date, the claim is: Check all that apply.	\$ 106,000.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim:	Credit Card Debt
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>7</sup> Nonpriority creditor's name and mailing address  Amerifi Capital, LLC c/o Gene Rosen's Law Firm 200 Garden City Plaza, Suite 405 Garden City, NY 11530	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 35,147.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>8</sup> Nonpriority creditor's name and mailing address  Anixter, Inc. 2301 Patriot Blvd Glenview Nas, IL 600268020	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 68,800.00
Date or dates debt was incurred _____  Last 4 digits of account number 270348	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>9</sup> Nonpriority creditor's name and mailing address  Black Box Design, Inc. PO Box 177 Bozeman, MT 59771	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 13,210.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>10</sup> Nonpriority creditor's name and mailing address  BPG Management Company, LP dba SE Property Owner, LLC 1100 Northmeadow Pkwy, Ste 120 Roswell, GA 30076	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Landlord	\$ 58,000.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>11</sup> Nonpriority creditor's name and mailing address  Cameron Mitchell Rest/Big Rock Chophouse 370 W Nationwide Blvd Columbus, OH 43215	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Customer Deposit Payment	\$ 150,660.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>12</sup> Nonpriority creditor's name and mailing address  Cameron Mitchell Rest/Ocean Prime Fort Lauderdale 370 W Nationwide Blvd Columbus, OH 43215	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Customer Deposit Payment	\$ 117,550.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>13</sup> Nonpriority creditor's name and mailing address  CDW Direct, LLC 200 N. Milwaukee Ave Vernon Hills, IL 60061	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 7,060.00
Date or dates debt was incurred _____  Last 4 digits of account number 9579799	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>14</sup> Nonpriority creditor's name and mailing address  Channel Partners Capital, LLC 10900 Wayzata Blvd Ste 300 Minnetonka, MN 55305	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Monies Loaned / Advanced	\$ 45,000.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>15</sup> Nonpriority creditor's name and mailing address  Commercial Collection Corporation of NY, Inc. 34 Seymour St Tonawanda, NY 14150	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Collection Agency for Synnex Corporation	\$ 0.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>16</sup> Nonpriority creditor's name and mailing address  Contemporary Research 3220 Commander Drive Suite 102 Carrollton, TX 75006	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 907.00
Date or dates debt was incurred _____  Last 4 digits of account number 02202107	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>17</sup>	Nonpriority creditor's name and mailing address  Crestron Electronics, Inc. PO Box 932917 Atlanta, GA 31193-2917	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 4,760.00
Date or dates debt was incurred _____ Last 4 digits of account number 1000489		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>18</sup>	Nonpriority creditor's name and mailing address  DHL Supply Chain 4505 Derrick Industrial Pkwy Union City, GA 30349	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Customer Deposit Payment	\$ 34,360.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>19</sup>	Nonpriority creditor's name and mailing address  DMKA LLC dba The Smarter Merchant c/o Yeshaya Gorkin, Esq. PO Box 605 New York, NY 10038	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Pending Lawsuit	\$ 25,312.60
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>20</sup>	Nonpriority creditor's name and mailing address  Duncan-Parnell, Inc. PO Box 604176 Charlotte, NC 28260-4176	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 465.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>21</sup>	Nonpriority creditor's name and mailing address  Fenix Funding/JJM Enterprise 370 Lexington Ave Suite 801 New York, NY 10017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Monies Loaned / Advanced	\$ 60,000.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>22</sup> Nonpriority creditor's name and mailing address  Flux Modern Architects 2909 Langford Rd A600 Norcross, GA 30071	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Customer Deposit Payment
Date or dates debt was incurred _____  Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. <sup>23</sup> Nonpriority creditor's name and mailing address  ForHair 1090 Powers Place Alpharetta, GA 30003	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Customer Deposit Payment
Date or dates debt was incurred _____  Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. <sup>24</sup> Nonpriority creditor's name and mailing address  Georgia Power Company 96 Annex Atlanta, GA 30396-0001	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Utility Services
Date or dates debt was incurred _____  Last 4 digits of account number <u>58820-05044</u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. <sup>25</sup> Nonpriority creditor's name and mailing address  Grainger 401 S Wright Road Janesville, WI 53546	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance
Date or dates debt was incurred _____  Last 4 digits of account number <u>843878752</u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3. <sup>26</sup> Nonpriority creditor's name and mailing address  Graybar Electric Company PO Box 403052 Atlanta, GA 30384-3052	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance
Date or dates debt was incurred _____  Last 4 digits of account number <u>236787</u>	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>27</sup>	<b>Nonpriority creditor's name and mailing address</b>  Guardian Life Insurance Company PO Box 824404 Philadelphia, PA 19182-4404	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 3,200.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	00 502645		
3. <sup>28</sup>	<b>Nonpriority creditor's name and mailing address</b>  Harman Professional, Inc. 8500 Balboa Blvd Northridge, CA 91329	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 29,000.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	127997		
3. <sup>29</sup>	<b>Nonpriority creditor's name and mailing address</b>  Heartland AV 9119 W Delano Street Wichita, KS 67212	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 11,863.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3. <sup>30</sup>	<b>Nonpriority creditor's name and mailing address</b>  Hesco 6915 Button Gwinnett Drive Doraville, GA 30340	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 500.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	8226		
3. <sup>31</sup>	<b>Nonpriority creditor's name and mailing address</b>  High Output, Inc. 495 Turnpike Street Canton, MA 02021	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 4,200.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	CEIGA		

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>32</sup>	<b>Nonpriority creditor's name and mailing address</b>  Highland Hill Capital LLC c/o David Fogel P.C. 1225 Franklin Ave, Suite 201 Garden City, NY 11530	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 339,466.23
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> _____			
3. <sup>33</sup>	<b>Nonpriority creditor's name and mailing address</b>  Ingram Micro, Inc. 1759 Wehrle Drive Williamsville, NY 14221	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 77,370.00
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> 70-467192-000			
3. <sup>34</sup>	<b>Nonpriority creditor's name and mailing address</b>  Kramer Electronics USA, Inc. 6 Route 173 West Clinton, NJ 08809	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 840.00
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> C105895			
3. <sup>35</sup>	<b>Nonpriority creditor's name and mailing address</b>  L&B Commercial Security, Inc. PO Box 1092 Norcross, GA 30091-1092	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 75.00
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> _____			
3. <sup>36</sup>	<b>Nonpriority creditor's name and mailing address</b>  Legrand AV 6436 City West Pkwy Eden Prairie, MN 55344	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 8,000.00
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> 132164			

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>37</sup>	Nonpriority creditor's name and mailing address  Lenbrook America PO Box 5982 Springfield, MA 01101-5982	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 19,821.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	COENIN		
3. <sup>38</sup>	Nonpriority creditor's name and mailing address  Lowell Manufacturing Company 100 Integram Drive Pacific, MO 63069	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 1,918.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	3127		
3. <sup>39</sup>	Nonpriority creditor's name and mailing address  Max Kopsho 401 Spring Willow Drive Sugar Hill, GA 30518	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:	\$ 22,000.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3. <sup>40</sup>	Nonpriority creditor's name and mailing address  Menard Electric Company 1360 Union Hill Rd Suite 4C, Mailbox 48 Alpharetta, GA 30004	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 30,000.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number			
3. <sup>41</sup>	Nonpriority creditor's name and mailing address  Mersive Technologies, Inc 1667 Cole Blvd Suite 225 Lakewood, CO 80401	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 1,313.00
Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number	1100		

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>42</sup>	Nonpriority creditor's name and mailing address  Milner, Inc. PO Box 923197 Norcross, GA 30010-3197	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 223.00
Date or dates debt was incurred _____ Last 4 digits of account number <u>C004841</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>43</sup>	Nonpriority creditor's name and mailing address  Monetaria 40 Wall Street Suite 2504 New York, NY 10005	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Collection Agency for The Smarter Merchant	\$ 0.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>44</sup>	Nonpriority creditor's name and mailing address  Newark Element 14 33190 Collection Center Drive Chicago, IL 60693-0331	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 31.00
Date or dates debt was incurred _____ Last 4 digits of account number <u>807597</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>45</sup>	Nonpriority creditor's name and mailing address  On Deck 4700 W Daybreak Pkwy Suite 200 South Jordan, UT 84009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Monies Loaned / Advanced	\$ 140,000.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>46</sup>	Nonpriority creditor's name and mailing address  Openpath Security Inc. PO Box 103253 Pasadena, CA 91189-3253	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 47,470.00
Date or dates debt was incurred _____ Last 4 digits of account number <u>25579</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>47</sup>	<b>Nonpriority creditor's name and mailing address</b> Paramount Lock & Hardware PO Box 1540 Winder, GA 30680	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 30,000.00
		<b>Basis for the claim:</b> Deficiency Balance	
		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. <sup>48</sup>	<b>Nonpriority creditor's name and mailing address</b> Penske Truck Leasing PO Box 532658 Atlanta, GA 30353-2658	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 600.00
		<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>49</sup>	<b>Nonpriority creditor's name and mailing address</b> ProMotion Technology Group, LLC 29755 Beck Road Wixom, MI 48393	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 30,000.00
		<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>50</sup>	<b>Nonpriority creditor's name and mailing address</b> Pure Water Partners 123 S 3rd Ave Suite 28 Sandpoint, ID 83864-1262	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 240.00
		<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>51</sup>	<b>Nonpriority creditor's name and mailing address</b> Quality Sound Studios 3730 Chamblee Tucker Road Chamblee, GA 30341	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 200,000.00
		<b>Basis for the claim:</b> Customer Deposit Payment	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>52</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Rapid/Small Business Financial Solutions, LLC 4500 East West Hwy 6th Floor Bethesda, MD 20814		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 25,400.00
			<b>Basis for the claim:</b> Monies Loaned / Advanced	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred	_____		
	Last 4 digits of account number	_____		
3. <sup>53</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Robotek Professional Services Group, LLC 1823 Alberta Lane Winder, GA 30680		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,000.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>54</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	RS Americas 7151 Jack Newell Blvd S Fort Worth, TX 76118		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 142.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	31059936	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>55</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	RTR Recovery, LLC 122 E 42nd Street Suite 2112 New York, NY 10168		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
			<b>Basis for the claim:</b> Collection Agency for Fenix Funding/JJM Enterprise	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>56</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	SAVI Controls, LLC 2520 Marsh Lane Carrollton, TX 75006		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,000.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	CEI840	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>57</sup>	Nonpriority creditor's name and mailing address  Scana Energy PO Box 105046 Atlanta, GA 30348-5046	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 1,370.00
Date or dates debt was incurred			
Last 4 digits of account number	3-3101-3483-7030		
3. <sup>58</sup>	Nonpriority creditor's name and mailing address  Sennheiser Electronic Corporation One Enterprise Drive Old Lyme, CT 06371	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 5,335.00
Date or dates debt was incurred			
Last 4 digits of account number	51040918		
3. <sup>59</sup>	Nonpriority creditor's name and mailing address  Shure Incorporated 5800 West Touhy Ave Niles, IL 60714-4608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 2,630.00
Date or dates debt was incurred			
Last 4 digits of account number	1315		
3. <sup>60</sup>	Nonpriority creditor's name and mailing address  Simpson, Uchitel & Wilson, LLP 3400 Piedmont Rd NE Suite 1100 Atlanta, GA 30305	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Attorney for ADI	\$ 0.00
Date or dates debt was incurred			
Last 4 digits of account number			
3. <sup>61</sup>	Nonpriority creditor's name and mailing address  Sound Contracting, Inc. 5665 E Wstover Ave Suite 104 Fresno, CA 93727	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 760.00
Date or dates debt was incurred			
Last 4 digits of account number			

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>62</sup>	<b>Nonpriority creditor's name and mailing address</b>  Spectrum Business - Charter Communication PO Box 94188 Palatine, IL 60094	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 260.00
<b>Basis for the claim:</b> Deficiency Balance			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>Date or dates debt was incurred</b> _____			
<b>Last 4 digits of account number</b> 8783 30 009 1068			
3. <sup>63</sup>	<b>Nonpriority creditor's name and mailing address</b>  Sweetwater Sound Inc. 5501 US Hwy 30 W Fort Wayne, IN 46818	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 240.00
<b>Basis for the claim:</b> Deficiency Balance			
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> 2060320			
3. <sup>64</sup>	<b>Nonpriority creditor's name and mailing address</b>  Synnex Corporation PO Box 406748 Atlanta, GA 30348-6748	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 300,000.00
<b>Basis for the claim:</b> Deficiency Balance			
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> 530268			
3. <sup>65</sup>	<b>Nonpriority creditor's name and mailing address</b>  Synter Resource Group 5935 Rivers Ave Suite 102 Charleston, SC 29406	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
<b>Basis for the claim:</b> Collection Agency for Penske Truck Leasing			
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> _____			
3. <sup>66</sup>	<b>Nonpriority creditor's name and mailing address</b>  T-Mobile Bellingham 3440 W Bakerview Bellingham, WA 98226-8105	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 49,800.00
<b>Basis for the claim:</b> Customer Deposit Payment			
<b>Date or dates debt was incurred</b> _____		<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>Last 4 digits of account number</b> _____			

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>67</sup> Nonpriority creditor's name and mailing address  Team 1st Technologies 4500 Anaheim Ave NE Bldg B, Ste 1 Albuquerque, NM 87113	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 3,000.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>68</sup> Nonpriority creditor's name and mailing address  TechDemand, LLC 8303 Pulaski Hwy Suite D Rosedale, MD 21231	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 765.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>69</sup> Nonpriority creditor's name and mailing address  The Leviton Law Firm One Pierce Place Suite 725W Itasca, IL 60143	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Attorney for Harman Professional, Inc	\$ 0.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>70</sup> Nonpriority creditor's name and mailing address  The Smarter Merchant 345 7th Ave New York, NY 10001	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Monies Loaned / Advanced	\$ 26,000.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>71</sup> Nonpriority creditor's name and mailing address  TOA Electronics, Inc. 1 Hermon Plaza Suite 700 Secaucus, NJ 07094	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: Deficiency Balance	\$ 1,270.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

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Amount of claim

3. <sup>72</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Tolleson, Inc. 803 Airpark Commerce Drive Nashville, TN 37217		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,000.00
			<b>Basis for the claim:</b> Deficiency Balance	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred	_____		
	Last 4 digits of account number	_____		
3. <sup>73</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	United Parcel Service PO Box 809488 Chicago, IL 60680-9488		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 100.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	5XX-616	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>74</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	United Rentals, Inc. PO Box 100711 Atlanta, GA 30384-0711		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,850.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	59733	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>75</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Utica National Insurance Group PO Box 6532 Utica, NY 13504-6532		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 6,000.00
			<b>Basis for the claim:</b> Deficiency Balance	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	207202421	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>76</sup>	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Vericore, LLC 10115 Kincey Ave. Suite 100 Huntersville, NC 28078		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 0.00
			<b>Basis for the claim:</b> Collection Agency for Accu-Tech	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>77</sup> Nonpriority creditor's name and mailing address  Vericore, LLC 10115 Kincey Ave. Suite 100 Huntersville, NC 28078	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Collection Agency for Sennheiser Electronic Corporation	\$ 0.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>78</sup> Nonpriority creditor's name and mailing address  Wagnor, Falconer & Judd, LTD 100 S Fifth Street Suite 800 Minneapolis, MN 55402	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Attorney for Anixter, Inc.	\$ 0.00
Date or dates debt was incurred _____  Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>79</sup> Nonpriority creditor's name and mailing address  WAVE Electronics 8648 Glenmont #130 Houston, TX 77036	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 1,473.00
Date or dates debt was incurred _____  Last 4 digits of account number 39458	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>80</sup> Nonpriority creditor's name and mailing address  West Penn Wire Corporation/Belden 28884 Network Place Chicago, IL 60673-1288	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 655.00
Date or dates debt was incurred _____  Last 4 digits of account number 53338	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>81</sup> Nonpriority creditor's name and mailing address  Whirlwind Music 99 Ling Road Rochester, NY 14612	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Deficiency Balance	\$ 45.00
Date or dates debt was incurred _____  Last 4 digits of account number 24103	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>82</sup>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply.	\$	Amount of claim
	Worldwide Express 29228 Network Place Chicago, IL 60673	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		6,300.00
		<b>Basis for the claim:</b> Deficiency Balance		
		<b>Is the claim subject to offset?</b>		
	Date or dates debt was incurred _____	<input checked="" type="checkbox"/> No		
	Last 4 digits of account number _____	<input type="checkbox"/> Yes		
3. <sup>83</sup>	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply.	\$	Amount of claim
	WyreStorm Technologies Proav Corporation Tech Valley Park 23 Wood Rd, Ste 600 Round Lake, NY 12151	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		7,362.00
		<b>Basis for the claim:</b> Deficiency Balance		
	Date or dates debt was incurred _____	<b>Is the claim subject to offset?</b>		
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply.	\$	Amount of claim
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<b>Basis for the claim:</b>		
	Date or dates debt was incurred _____	<b>Is the claim subject to offset?</b>		
	Last 4 digits of account number _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
3.	<b>Nonpriority creditor's name and mailing address</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply.	\$	Amount of claim
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<b>Basis for the claim:</b>		
	Date or dates debt was incurred _____	<b>Is the claim subject to offset?</b>		
	Last 4 digits of account number _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**5a. **Total claims from Part 1**5a. \_\_\_\_\_ \$ 83,114.305b. **Total claims from Part 2**5b. + \_\_\_\_\_ \$ 2,249,207.835c. **Total of Parts 1 and 2**5c. \_\_\_\_\_ \$ 2,332,322.13

Fill in this information to identify the case:

Debtor name Communications and Entertainment, Inc.

United States Bankruptcy Court for the: Northern District of Georgia

Case number (If known): \_\_\_\_\_ Chapter 7

Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

	State what the contract or lease is for and the nature of the debtor's interest	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1	Rental Lease: 250 Hembree Park Drive, Suite 114, Roswell, GA 30076 '~~~~~ State the term remaining List the contract number of any government contract	BPG Management Company, LP dba SE Property Owner, LLC 1100 Northmeadow Pkwy, Ste 120 Roswell, GA, 30076
2.2	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	
2.3	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	
2.4	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	
2.5	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	

## Fill in this information to identify the case:

Debtor name Communications and Entertainment, Inc.United States Bankruptcy Court for the: Northern District of Georgia

Case number (if known): \_\_\_\_\_

 Check if this is an amended filing

## Official Form 206H

## Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

## 1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	Check all schedules that apply:
Name	Mailing address	Name	
2.1 Tim A. Gorisek	1558 School House Run Dacula, GA 30019	Ally Servicing LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	460 Holder Road Temple, GA 30179	American Express	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.3			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Communications and Entertainment, Inc.  
United States Bankruptcy Court for the: Northern District of Georgia  
(State)  
Case number (If known): \_\_\_\_\_

Check if this is an amended filing

## Official Form 206Sum

### Summary of Assets and Liabilities for Non-Individuals

12/15

#### Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B* .....

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B* .....

\$ 133,584.25

1c. **Total of all property:**

Copy line 92 from *Schedule A/B* .....

\$ 133,584.25

#### Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* .....

\$ 127,500.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F* .....

\$ 83,114.30

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .....

+\$ 2,249,207.83

4. **Total liabilities** .....

Lines 2 + 3a + 3b

\$ 2,459,822.13

Fill in this information to identify the case and this filing:

Debtor Name Communications and Entertainment, Inc.

United States Bankruptcy Court for the: Northern District of Georgia

Case number (*If known*): \_\_\_\_\_

## Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

#### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)*
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)*
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)*
- Schedule H: Codebtors (Official Form 206H)*
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)*
- Amended Schedule \_\_\_\_\_*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)*
- Other document that requires a declaration\_\_\_\_\_*

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/22/2025  
MM / DD / YYYY

 /s/ Rodney Holder

Signature of individual signing on behalf of debtor

Rodney Holder

Printed name

Owner

Position or relationship to debtor

ABC/Amega  
500 Seneca Street  
Suite 503  
Buffalo, NY 14204

Accu-Tech  
11350 Old Roswell Road  
Suite 100  
Roswell, GA 30009

Adams, Evans & Ross  
3760 Sixes Rd  
Suite 126  
Canton, GA 30114

ADI  
260 Old Country Road  
Melville, NY 11747

Advantage Products Enterprise (APE)  
1235 Park Lane S  
Jupiter, FL 33458

Ally Servicing LLC  
PO Box 380902  
Bloomington, MN 55438-0902

American Express  
PO Box 981535  
El Paso, TX 79998-1535

Amerifi Capital, LLC  
c/o Gene Rosen's Law Firm  
200 Garden City Plaza, Suite 405  
Garden City, NY 11530

Anixter, Inc.  
2301 Patriot Blvd  
Glenview Nas, IL 600268020

Black Box Design, Inc.  
PO Box 177  
Bozeman, MT 59771

BPG Management Company, LP  
dba SE Property Owner, LLC  
1100 Northmeadow Pkwy, Ste 120  
Roswell, GA 30076

Cameron Mitchell Rest/Big Rock Chophouse  
370 W Nationwide Blvd  
Columbus, OH 43215

Cameron Mitchell Rest/Ocean Prime Fort Lauderdale  
370 W Nationwide Blvd  
Columbus, OH 43215

CDW Direct, LLC  
200 N. Milwaukee Ave  
Vernon Hills, IL 60061

Channel Partners Capital, LLC  
10900 Wayzata Blvd  
Ste 300  
Minnetonka, MN 55305

Commercial Collection Corporation of NY, Inc.  
34 Seymour St  
Tonawanda, NY 14150

Contemporary Research  
3220 Commander Drive  
Suite 102  
Carrollton, TX 75006

Crestron Electronics, Inc.  
PO Box 932917  
Atlanta, GA 31193-2917

DHL Supply Chain  
4505 Derrick Industrial Pkwy  
Union City, GA 30349

DMKA LLC dba The Smarter Merchant  
c/o Yeshaya Gorkin, Esq.  
PO Box 605  
New York, NY 10038

Donnie Holder  
460 Holder Road  
Temple, GA 30179

Duncan-Parnell, Inc.  
PO Box 604176  
Charlotte, NC 28260-4176

Fenix Funding/JJM Enterprise  
370 Lexington Ave  
Suite 801  
New York, NY 10017

Flux Modern Architects  
2909 Langford Rd A600  
Norcross, GA 30071

High Output, Inc.  
495 Turnpike Street  
Canton, MA 02021

Ford Credit  
PO Box 650575  
Dallas, TX 75265-0575

Highland Hill Capital LLC  
c/o David Fogel P.C.  
1225 Franklin Ave, Suite 201  
Garden City, NY 11530

ForHair  
1090 Powers Place  
Alpharetta, GA 30003

Ingram Micro, Inc.  
1759 Wehrle Drive  
Williamsville, NY 14221

Fulton County Tax Commissioner  
141 Pryor Street, SW  
Atlanta, GA 30303

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101

Georgia Department of Revenue  
Compliance Division - ARCS - Bankruptcy  
1800 Century Blvd NE, Suite 9100  
Atlanta, GA 30345-3205

Kramer Electronics USA, Inc.  
6 Route 173 West  
Clinton, NJ 08809

Georgia Power Company  
96 Annex  
Atlanta, GA 30396-0001

L&B Commercial Security, Inc.  
PO Box 1092  
Norcross, GA 30091-1092

Grainger  
401 S Wright Road  
Janesville, WI 53546

Legrand AV  
6436 City West Pkwy  
Eden Prairie, MN 55344

Graybar Electric Company  
PO Box 403052  
Atlanta, GA 30384-3052

Lenbrook America  
PO Box 5982  
Springfield, MA 01101-5982

Guardian Life Insurance Company  
PO Box 824404  
Philadelphia, PA 19182-4404

Lowell Manufacturing Company  
100 Integram Drive  
Pacific, MO 63069

Harman Professional, Inc.  
8500 Balboa Blvd  
Northridge, CA 91329

Max Kopsho  
401 Spring Willow Drive  
Sugar Hill, GA 30518

Heartland AV  
9119 W Delano Street  
Wichita, KS 67212

Menard Electric Company  
1360 Union Hill Rd  
Suite 4C, Mailbox 48  
Alpharetta, GA 30004

Hesco  
6915 Button Gwinnett Drive  
Doraville, GA 30340

Mersive Technologies, Inc  
1667 Cole Blvd  
Suite 225  
Lakewood, CO 80401

Milner, Inc.  
PO Box 923197  
Norcross, GA 30010-3197

RS Americas  
7151 Jack Newell Blvd S  
Fort Worth, TX 76118

Monetaria  
40 Wall Street  
Suite 2504  
New York, NY 10005

RTR Recovery, LLC  
122 E 42nd Street  
Suite 2112  
New York, NY 10168

Newark Element 14  
33190 Collection Center Drive  
Chicago, IL 60693-0331

SAVI Controls, LLC  
2520 Marsh Lane  
Carrollton, TX 75006

On Deck  
4700 W Daybreak Pkwy  
Suite 200  
South Jordan, UT 84009

Scana Energy  
PO Box 105046  
Atlanta, GA 30348-5046

Openpath Security Inc.  
PO Box 103253  
Pasadena, CA 91189-3253

Sennheiser Electronic Corporation  
One Enterprise Drive  
Old Lyme, CT 06371

Paramount Lock & Hardware  
PO Box 1540  
Winder, GA 30680

Shure Incorporated  
5800 West Touhy Ave  
Niles, IL 60714-4608

Penske Truck Leasing  
PO Box 532658  
Atlanta, GA 30353-2658

Simpson, Uchitel & Wilson, LLP  
3400 Piedmont Rd NE  
Suite 1100  
Atlanta, GA 30305

ProMotion Technology Group, LLC  
29755 Beck Road  
Wixom, MI 48393

Sound Contracting, Inc.  
5665 E Wstover Ave  
Suite 104  
Fresno, CA 93727

Pure Water Partners  
123 S 3rd Ave  
Suite 28  
Sandpoint, ID 83864-1262

Spectrum Business - Charter Communication  
PO Box 94188  
Palatine, IL 60094

Quality Sound Studios  
3730 Chamblee Tucker Road  
Chamblee, GA 30341

Sweetwater Sound Inc.  
5501 US Hwy 30 W  
Fort Wayne, IN 46818

Rapid/Small Business Financial Solutions, LLC  
4500 East West Hwy  
6th Floor  
Bethesda, MD 20814

Synnex Corporation  
PO Box 406748  
Atlanta, GA 30348-6748

Robotek Professional Services Group, LLC  
1823 Alberta Lane  
Winder, GA 30680

Synter Resource Group  
5935 Rivers Ave  
Suite 102  
Charleston, SC 29406

T-Mobile Bellingham  
3440 W Bakerview  
Bellingham, WA 98226-8105

Vericore, LLC  
10115 Kincey Ave.  
Suite 100  
Huntersville, NC 28078

Team 1st Technologies  
4500 Anaheim Ave NE  
Bldg B, Ste 1  
Albuquerque, NM 87113

Wagnor, Falconer & Judd, LTD  
100 S Fifth Street  
Suite 800  
Minneapolis, MN 55402

TechDemand, LLC  
8303 Pulaski Hwy  
Suite D  
Rosedale, MD 21231

WAVE Electronics  
8648 Glenmont #130  
Houston, TX 77036

The Leviton Law Firm  
One Pierce Place  
Suite 725W  
Itasca, IL 60143

West Penn Wire Corporation/Belden  
28884 Network Place  
Chicago, IL 60673-1288

The Smarter Merchant  
345 7th Ave  
New York, NY 10001

Whirlwind Music  
99 Ling Road  
Rochester, NY 14612

Tim A. Gorisek  
1558 School House Run  
Dacula, GA 30019

Worldwide Express  
29228 Network Place  
Chicago, IL 60673

TOA Electronics, Inc.  
1 Hermon Plaza  
Suite 700  
Secaucus, NJ 07094

WyreStorm Technologies Proav Corporation  
Tech Valley Park  
23 Wood Rd, Ste 600  
Round Lake, NY 12151

Tolleson, Inc.  
803 Airpark Commerce Drive  
Nashville, TN 37217

United Parcel Service  
PO Box 809488  
Chicago, IL 60680-9488

United Rentals, Inc.  
PO Box 100711  
Atlanta, GA 30384-0711

Utica National Insurance Group  
PO Box 6532  
Utica, NY 13504-6532

United States Bankruptcy Court  
Northern District of Georgia

In re: Communications and Entertainment, Inc.

Case No.

Debtor(s)

Chapter 7

**Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 02/22/2025

/s/ Rodney Holder

Signature of Individual signing on behalf of debtor

Owner

Position or relationship to debtor

United States Bankruptcy Court

IN RE:

Communications and Entertainment, Inc.

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**LIST OF EQUITY SECURITY HOLDERS**

Registered name and last known address of security holder	Shares (Or Percentage)	Security Class (or kind of interest)
Val Dempsey 2628 Camille Drive, Atlanta, GA 30329	11	General partner
David Lee 1408 Defoors Drive NW, Atlanta, GA 30318	11	General partner
C&C Holder Solutions Inc. ,	80	